

ASHBURTON URBAN DISTRICT



ANNUAL REPORT
OF THE HEALTH OF THE DISTRICT
FOR THE YEAR 1960



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F.T. HUNT, MB., BS., MRCS., LRCP., DPH., DIH.,

MEDICAL OFFICER OF HEALTH



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TABLE OF CONTENTS

	<u>PAGE</u>
INTRODUCTION	1
STAFF AND PUBLIC HEALTH COMMITTEE	3
SECTION A. STATISTICS	4
SECTION B. HEALTH SERVICES FOR THE AREA	6
SECTION C. INFECTIOUS DISEASES	9
SECTION D. SANITARY CIRCUMSTANCES OF THE AREA	11
SECTION E. INSPECTION AND SUPERVISION OF FOOD	15
SECTION F. HOUSING	18
APPENDIX A. ADMINISTRATION OF THE FACTORIES ACT	19
APPENDIX B. WATER SUPPLY	21

ASHBURTONN URBAN DISTRICT COUNCIL

To the Chairman and Members of the Public Health Committee

Mr Chairman and Gentlemen,

I have the honour to submit my Annual Report for the year 1960.

The estimated population has remained constant at 2,700. The birth rate was 16.4 compared with 17.2 in 1959. The death rate has fallen from 13.1 in 1959 to 10.4.

Very few infectious diseases were notified during the year. Respiratory infections were more prevalent during the first two months of the year and an outbreak of chickenpox occurred during May. Anthrax was made a notifiable disease during the year and steps have been taken to ensure an early diagnosis and control of this disease.

The quantity and quality of the water was regarded as satisfactory during the year but there is still a need for a storage reservoir to supply dwellings in the Hele Cross and Holne Turn area.

During the early part of the year a review was made of the slaughterhouses and slaughtering facilities in the District. It was considered that the local slaughterhouses could comply with the construction regulations made under the Slaughterhouses Act 1958. The Meat (Staining and Sterilisation) Regulations were welcomed but I would still like to see an arrangement whereby all meat unfit for human consumption must be both sterilised and stained before being offered for sale for animal consumption.

The Noise Abatement Act came into operation during November. Noise or vibration which is a nuisance can now be regarded as a statutory nuisance and the appropriate action to remedy such a nuisance can now be taken by a local authority. Noise has become an increasing problem over the years and this local authority previously had no general powers conferred on it to deal with nuisance arising as a result of noise or vibration.

The Caravan Sites and Control of Development Act 1960 came into force during August and confers on local authorities effective means for controlling caravan sites. It is the intention of this Act to improve caravan sites and control the establishment of new sites. At the same time it will be possible to raise the aesthetic and sanitary conditions on such sites.

Visits were made to food premises in the area during the early part of the year to advise on matters relating to food hygiene. Conditions at these premises were generally found to be satisfactory.

During the year I have made reports to the Public Health Committee on such items as medical radiological hazards, strontium 90 and the general incidence of infectious diseases. Comments have been made on vaccination against influenza, poliomyelitis and tuberculosis, whilst routine reports were made on such matters as unfit housing, food hygiene and infectious diseases.

Ending on a personal note, I would like to thank the staff of the Urban District Council for their help during the year and particularly to Mr Jones in his dual capacity as Surveyor and Public Health Inspector.

I am,

Mr Chairman and Gentlemen,

Your Obedient Servant,

F.T. Hunt
.....
F.T. Hunt.

Medical Officer of Health.

ASHBURTON URBAN DISTRICT

HEALTH COMMITTEE

CHAIRMAN	Councillor T.W. Gracey.
CHAIRMAN OF THE COUNCIL	Councillor S. Baker, JP.,
COUNCILLORS	
	R. Arscott.
	H.C. Bennett.
	W.E. Cartwright.
	A. Fallows.
	F.C. Tucker.

PUBLIC HEALTH STAFF

MEDICAL OFFICER OF HEALTH

F.T. HUNT, MB., BS., MRCS., LRCP., DPH., DIH.,

PUBLIC HEALTH INSPECTOR

H.V. JONES. MRSH.,

PUBLIC HEALTH DEPARTMENT

Town Hall,
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MEDICAL OFFICER OF HEALTH'S DEPARTMENT

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MEDICAL OFFICER OF HEALTH'S CLERK

Miss W. Taylor.

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CONTENTS

Editorial	1
Original Papers	1-100
Review Articles	101-200
Correspondence	201-300
Obituary	301-400
Index	401-500
Subject Index	501-600
Author Index	601-700
Editorial Board	701-800
Editorial Board	801-900
Editorial Board	901-1000

SECTION A.

1. GENERAL STATISTICS

Area	6,778 acres
Number of dwelling houses	883
Dwellings owned by the Council	220
Council dwellings per 1,000 population	81.5
Rateable value (1st April 1960)	£30,643
Estimated product of ld. rate	£115

2. VITAL STATISTICS

Estimated mid-year population	2,700
Population at 1951 census	2,705

Births

Live births (22 males, 18 females)	40
Live birth rate per 1,000 population	14.8
Illegitimate live births per cent of total live births	7.5
Still births	1.0
Still birth rate per 1,000 population	0.4
Still birth rate per 1,000 total live and still births	24.4
Total live and still births	41
Crude birth rate per 1,000 population	15.2
Corrected birth rate per 1,000 population	16.4

INFANT MORTALITY RATES

Total infant deaths per 1,000 total live births	50
Legitimate infant deaths per 1,000 legitimate live births ,	27
Illegitimate infant deaths per 1,000 illegitimate live births	333
Neo-natal mortality rate	50
Early neo-natal mortality rate	50
Perinatal mortality rate	73.2

Deaths of children under the age of one year are classified as infant deaths. The neo-natal mortality rate indicates the number of infants dying within the first four weeks of birth per 1,000 total live births, whilst the early neo-natal mortality rate considers infants dying within the first week of birth. The perinatal mortality rate indicates the number of still births and infant deaths under one week combined per 1,000 total live and still births.

MATERNAL MORTALITY (Including Abortion)

Number of deaths NIL
 Rate per 1,000 total live and still births NIL

DEATHS

Total deaths (Males .19.....Females...19.....)..... 38
 Crude death rate per 1,000 population 14.1
 Corrected rate per 1,000 population 10.4

CLASSIFICATION OF DEATHS

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Malignant neoplasm - stomach	-	1	1
Malignant neoplasm - lung, bronchus	1	-	1
Malignant neoplasm - uterus	-	2	2
Other malignant & lymphatic neoplasms	3	1	4
Diabetes	-	1	1
Vascular lesions of nervous system	1	5	6
Coronary disease, angina	6	1	7
Hypertension with heart disease	1	-	1
Other heart diseases	2	4	6
Other circulatory disease	-	1	1
Pneumonia	1	-	1
Bronchitis	1	-	1
Congenital malformations	1	-	1
Other defined and ill-defined diseases	-	3	3
All other accidents	1	-	1
Suicide	1	-	1
	19	19	38

SECTION B.

GENERAL PROVISIONS OF HEALTH SERVICES

1. Hospitals

The Ashburton and Buckfastleigh Hospital is situated in Ashburton. This is a general practitioner hospital with 15 medical and surgical beds.

Hospital coverage for the district is also provided by Newton Abbot Hospital and Torbay Hospital. Maternity cases are admitted to Broomborough Hospital, Totnes.

2. County Council Health Services

Under the National Health Services Act, 1946, the County Council provides the following services:-

- a) Domiciliary midwives.
- b) Home nurses.
- c) Health Visitors.
- d) Services for the care of expectant and nursing mothers and children under five.
- e) Ambulance services.
- f) Vaccination and immunisation procedures.
- g) Domestic help services (home helps)
- h) Arrangements for the prevention of illness, the care of persons suffering from illness or mental disorder, and the after care of such persons.

A district nurse-midwife works in the district and there is one Health Visitor available. A child welfare clinic is held every fortnight in Ashburton and the home help service is organised by the County Council with the district nurse acting as the local organiser. The ambulance service is operated by voluntary organisations, and ambulances are available at all times to convey people who are physically or mentally ill to hospitals, clinics etc.,

The County Council, through the Welfare Committee, provides residential accommodation in homes or hostels for persons who, by reason of age, infirmity or other circumstances, are in need of care and attention not otherwise available for them. In Ashburton accommodation has been provided at "Kenwyn", Western Road,

3. Laboratory Services

Bacteriological examinations of pathological specimens and samples of milk and ice cream are carried out by either the Public Health Laboratory Service at Exeter or the Public Health Laboratory Service at Plymouth. The chemical analysis of water and other samples is undertaken by Public Analysts in Exeter.

4. Tuberculin Testing Scheme (School Children)

All children attending County Primary schools in the District now receive, as part of the general supervision of their health, a special tuberculin skin test each year. This test may indicate if the child is suffering from or has suffered from tuberculosis. Such children are referred for further examination and, by this means, the early onset of tuberculosis can be detected in the child or in the child's family.

The scheme has, as its main object, the detection of previously unsuspected cases of tuberculosis. The examination of the child gives the lead for tracing the source of the infection in the community.

5. Removal of Old and Infirm Persons to Institutions.

Under Section 47 of the National Assistance Act, 1948, the Council may apply to a court for an order to remove to a suitable institution any persons who

- a) are suffering from grave chronic disease, or being aged, infirm or physically incapacitated, are living in insanitary conditions and
- b) Are unable to attend to themselves and are not receiving from other persons thorough care and attention.

The National Assistance (Amendment) Act 1951, amended Section 47 of the 1948 Act, and enabled application for removal of urgent cases to be made by the local authority or by the Medical Officer of Health, if authorised by the Council to do so, without giving 7 days notice as previously required.

Such application may be made either to a court of "summary jurisdiction", or to a single justice, on a certificate by the Medical Officer of Health and another registered medical practitioner.

Detention orders made in respect of these urgent cases are limited to three weeks and, if it is necessary to extend this

time, compliance must be made with the original requirements of Section 47.

During the year it was not found necessary to resort to procedure under these Acts.

SECTION C.

PREVALENCE AND CONTROL OF INFECTIOUS AND OTHER DISEASES

1. Notifiable Diseases

During the year one case of pulmonary tuberculosis was notified in a male of 57 years.

2. Outbreaks of Other Diseases

There are a number of infectious diseases which are not notifiable diseases and are not referred to the Medical Officer of Health. A knowledge of the incidence of such diseases in the community is often only acquired when they become widespread and extensive.

There was an outbreak of chickenpox during May and early June, when young school children were mainly affected. Respiratory infections were very prevalent during the first two months of the year and children between the ages of three and eight were the chief victims.

3. Immunisation and Vaccination

Vaccination and immunisation is available to give protection against such diseases as smallpox, poliomyelitis, whooping cough, diphtheria, tetanus and tuberculosis. These procedures can be carried out by local medical practitioners and also, under the Devon County Council scheme, sessions are carried out at local schools and the local Infant Welfare Clinic.

4. New Notifiable Diseases

The Public Health (Infectious Diseases) Amendment Regulations 1960 came into force on December 1st 1960 and provided for the notification by medical practitioners to Medical Officers of Health of all cases of anthrax.

Anthrax is an acute bacterial infection of animals and man. In man it is usually a disease of the skin but can also affect the lungs and gastro intestinal tract. It is primarily an occupational hazard of agricultural workers handling hair and wool. Fortunately it occurs only infrequently in England and Wales when the source of infection is generally the tissues of animals dying of the disease or the contaminated hair, hides and soil associated with the infected animal.

Anthrax has not previously been a notifiable disease under the Public Health Acts but medical practitioners have been required, under the 1937 Factories Act, to notify the Chief

Inspector of Factories of cases of anthrax contacted in any factory.

By the Anthrax Order 1938 the Medical Officer of Health must be notified by the Inspector under the Diseases of Animals Acts if a case of anthrax in an animal arises in his district. These notifications are made so that advice can be given on the question of disinfection.

The notification of anthrax will probably result in cases being identified, diagnosed and treated more rapidly. In addition the Medical Officer of Health will now be empowered to investigate the source of the infection and to take any necessary action in cases occurring outside the scope of the Factories Acts. Until now, no one has had this responsibility. Steps are already being taken to improve the arrangements for early diagnosis and treatment of suspected cases of anthrax.

5. The Civil Defence (Diseases) Regulations, 1960

These regulations came into force on April 1st and place on local authorities, when required by the Minister of Health, the duty to make plans for the prevention and control of disease, or spread of disease in circumstances arising out of hostile action or the threat of hostile action. In addition local authorities may be required to train the members of their staff in duties relating to the prevention or spread of such disease.

6. Authentication of International Certificates

In order to prevent the spread of infectious diseases several countries required that visitors should be vaccinated or innoculated against specified diseases. International certificates have now been prescribed for smallpox, yellow fever and cholera.

When completed by the medical practitioner these certificates must be authenticated by the Medical Officer of Health. It is the responsibility of travellers to see that international certificates of vaccination are available for their family practitioner to sign and the Medical Officer of Health to authenticate. These certificates should be obtained by the travelling agency organising the individual's journey. It is not the responsibility of local authorities to provide these documents.

SECTION D.

SANITARY CONDITIONS IN THE AREA

1. Water

Upland surface water is collected from the Moors and reaches the district by gravity from a large storage reservoir. In addition, a small amount of water is continually extracted from the River Ashburn to augment the supply. The water is chlorinated and hardened and the quantity is sufficient for the needs of the community except during periods of drought. Frequent examinations have shown the quality of the water to be satisfactory.

A small number of dwelling houses obtain their water from springs and wells whilst a number of others are served by water from a main of the Paignton Urban District Council.

2. Sewage Disposal

The sewage is treated at the Buckfastleigh sewage works.

3. Refuse Collection

There is a weekly collection of refuse in the greater part of the district whilst a monthly collection is carried out in the more remote areas. The tip is a disused quarry at Gallows Park and this is situated well away from residential property and causes no nuisance.

4. Pest and Rodent Control

Under the prevention of Damage by Pests Act 1949, this local authority has an obligation to ensure that, as far as is practicable, the area is kept free from rats or mice. For this purpose frequent inspections are necessary and, in addition, occupiers of land are required to give notice to the local authority whenever it comes to their knowledge that rats or mice are present on the land in substantial numbers. In the case of food premises, the notification must be made to the Ministry of Agriculture, Fisheries and Food.

Under the Act, the local authority may serve on the owner or occupier of any land, notice requiring him to take steps for the destruction of rats or mice on the land and may also require the carrying out of any structural repairs or any other works. If such a notice is not complied with, then the local authority may carry out the destruction of the pests and recover the necessary expense from the persons concerned.

A rodent operator works on a part time basis for this authority. Regular treatment is carried out on the refuse tip and test baiting is carried out in the sewage system. The operator frequently visits private and business premises in order to destroy pests.

5. Factories

This local authority is responsible for enforcing the provisions in the Factories Act 1937 relating to sanitary conveniences and the regulations made in connection with these in all factories. The District Council is also responsible for enforcing the provisions of the Act dealing with cleanliness, overcrowding, temperature, ventilation and drainage of floors in all factories not using mechanical power.

Visits were made to the factories in the area by the Public Health Inspector. Six of the eleven factories in Ashburton do not use mechanical power.

Part 8 of the Factories Act 1937 deals with home work and the provisions relating to this are enforced by the District Council. No lists of outworkers were received by the Council during the year.

Conditions at all the factories were found to be satisfactory.

6. Slaughterhouses

Visits were made to the slaughterhouses in connection with the Construction Regulations, defined in the Slaughterhouses (Hygiene) Regulations and the Slaughter of Animals (Prevention of Cruelty) Regulations 1958, which are due to come into force in the future.

Following a review of the slaughterhouse facilities in the district it was ascertained that:-

1. The slaughterhouse facilities were considered to be adequate to meet the existing and future demands of the community.
2. The existing two slaughterhouses, while not complying with all the requirements of the Construction Regulations, were expected to comply with all the requirements by the 31st March 1961.

	Cattle excluding cows	Cows	Calves	Sheep & Lambs	Pigs
No killed	223	-	9	1106	245
No inspected	215	-	9	1100	240
Whole carcasses condemned due to disease	-	-	1	1	-
Carcases of which some part or organ was condemned due to disease	8	-	-	1	-

7. Noise

The Noise Abatement Act came into operation on the 27th November. Noise or vibration which is a nuisance can now be regarded as a statutory nuisance for the provisions of Part 3 of the 1936 Public Health Act. Noise has become an increasing problem over the years and, until the introduction of this Act, a local authority had no general powers conferred on it to deal with nuisances arising as a result of noise or vibration.

8. Offices Act, 1960

This Act was introduced during the year and comes into force on January 1st 1962. Under the Act regulations can be made for

securing the health, safety and welfare of persons employed in offices. Apart from a few exceptions it will be the duty of the local authority to enforce this act and the regulations made under it.

It is anticipated that regulations will be made relating to sufficient and suitable sanitary conveniences, the provision of adequate and suitable washing facilities, the prevention of overcrowding, the provision of sufficient and suitable lighting, the provision of a standard and reasonable temperature, the provision of adequate ventilation and measures to ensure that all offices shall be kept clean.

9. Caravans

The Caravan Sites and Control of Development Act 1960 came into force on the 29th August, and conferred on local authorities effective powers for controlling caravan sites. In addition to strengthening the powers of planning authorities it introduced a new licensing system which will be administered by County Borough and County District Councils.

In future, caravan sites will require to be licensed. From the public health aspect, local licensing authorities will obviously be concerned with requirements in the licenses relating to such items as water supply, refuse disposal, sanitary accommodation, washing facilities, drainage and sewage disposal. Other licence requirements, indirectly affecting the health of the inhabitants on the caravan sites, could relate to the control and maintenance of the caravans, the minimum distance between caravans, the spacing and arrangement of the dwellings and recreational space.

10. Visits and Inspections made during the Year

Visits to dwelling houses	80
Visits to food premises	45
Visits to slaughterhouses	108
Visits to factories and workshops	11
Visits to caravans	30
Drainage inspections	8
Miscellaneous visits and inspections	15

SECTION E.

INSPECTION AND SUPERVISION OF FOOD

1. Food Premises

There were 39 food premises operating in the area during the year. This number was made up of 15 cafes, hotels and restaurants together with 24 retail food shops. Visits were made to the majority of these premises over the year and selected premises were visited during the summer months.

2. Food Hygiene

The requirements of the Food Hygiene Regulations had already been emphasised during 1959 and the standard of hygiene observed during 1960 was generally satisfactory.

3. Unsound Food

The amount of unsatisfactory food surrendered or condemned was as follows:-

503 lbs of cheese	24 steak and kidney pies
36 lbs of corned beef	7 $\frac{1}{4}$ lbs of veal & ham pie
4 lbs of chopped pork	

At the local slaughterhouses the following meat was condemned or surrendered.

The complete carcasses of one calf and one pig.
Parts of the carcasses of one lamb and eight steers and heifers.

4. Milk (Special Designation) Regulations, 1960

These regulations were introduced during the year and it is the purpose of the regulations to ensure that milk is produced, bottled and distributed under such conditions that it reaches the public in a clean and safe state. Conditions have been laid down under which specially designated milk (tuberculin tested, pasteurized and sterilised) may be sold.

Principle changes introduced in the regulations include the issue of Dealer's licences by Food and Drugs Authorities instead of by all Borough, Urban District and Rural District Councils.

5. The Meat (Staining and Sterilisation) Regulations 1960

These regulations came into force on November 1st 1960. All meat which is unfit for human consumption at slaughterhouses must now be sterilised before it leaves the premises. If there are no facilities for sterilising at the slaughterhouses, provision could be made for the meat to be removed to a place where it will be sterilised or destroyed. In the case of knacker's yards, all meat must be stained or sterilised before it leaves the premises. In a similar manner, imported meat unfit for human consumption must be sterilised as soon as possible after it has entered the country.

It should now no longer be possible for retailers of pet's meat to obtain unfit meat unless it has been sterilised or stained. If any meat comes into their possession which has not been sterilised or stained, then it is the retailer's responsibility to sterilise it before sale.

The regulations are framed so that hospitals, manufacturing chemists, veterinary schools and similar institutions can continue to obtain supplies of unstained or unsterilised meat without restriction.

It will be recalled that similar regulations were due to come into force on the 1st April 1959 but were repealed in the previous month. These new regulations have been designed on similar lines and will reduce, to some extent the likelihood of disease being spread to humans from animals who consume unfit meat. I think it would have been more satisfactory however, if meat unfit for human consumption was required to be first sterilised and then stained before leaving slaughterhouses. Such meat could then be removed, identified and checked.

6. Food Hygiene (General Regulations)

These regulations came into force on October 1st 1960 and they consolidate the previous regulations of 1955 and 1957, with a number of amendments, none affecting their main substance.

7. Authorised Officers (Meat Inspection) Regulations 1960

These regulations prescribe a new qualification, the holder of which will be eligible to be appointed by a local authority as an authorised officer to act in relation to the examination and seizure of meat. The primary reason for creating this new class of officer, a meat inspector, is to help overcome the difficulty which is being experienced by

SECTION F.

HOUSING.

1. General Information

Total number of dwelling houses in district	883
Total number of dwellings owned by the Council	220
Total number of visits made to dwelling houses	80

2. Unfit Houses

Formal action by the local authority was considered in respect of three houses during the year.

Three houses were made fit following informal action and in a number of other houses statutory public health nuisances were remedied following informal approaches to the owners of these dwellings.

No clearance areas were declared during the year.

3. Improvement of Houses

It is still apparent that many more houses could be improved if owners made use of the Standard and Discretionary Improvement Grants.

APPENDIX

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH
IN RESPECT OF THE YEAR 1960 FOR THE URBAN DISTRICT
OF ASHBURTON IN THE COUNTY OF DEVON

Prescribed Particulars on the Administration
of the Factories Act, 1937

PART 1 OF THE ACT

1. Inspections for purposes of provisions as to health

Premises (1)	Number on Register (2)	Number of		Occupiers prosecuted (5)
		Inspections (3)	Written Notices (4)	
1. Factories in which Sections 1,2,3,4 and 6 are to be enforced by Local Authorities	6	6	Nil	Nil
2. Factories not included in (1) in which Section 7 is enforced by the Local Authority	5	5	Nil	Nil
3. Other premises in which Section 7 is enforced by the Local Authority (excluding out- workers premises	-	-	-	-
Total	11	11	-	-

2. Cases in which DEFECTS were found

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted.
	Found	Remedied	Referred		
			To H.M. Insp	By H.M. Insp.	
(1)	(2)	(3)	(4)	(5)	(6)
Want of cleanliness (S.1)	-	-	-	-	-
Overcrowding (S.2)	-	-	-	-	-
Reasonable temp.	-	-	-	-	-
Inadequate ventilation (S.4)	-	-	-	-	-
Ineffective drainage of floors (S.6)	-	-	-	-	-
Sanitary convenience (a) Insufficient (b) Unsuitable or defective (c) Not separate for sexes	-	-	-	-	-
Other offences against the ACT (not including offences relating to Outwork	-	-	-	-	-
Total	-	-	-	-	-

PART 8 OF THE ACT

OUTWORK

Sections 110 and 111

There were no outworkers in the District and there is thus a
NIL RETURN.

APPENDIX B

Water Supply

1. The water supply of the area was found to be satisfactory both in quality and quantity throughout the year.
2. Bacteriological examinations were made of the water going into supply after treatment. 3 examinations were carried out and no coliform bacilli were found in any of the samples. No chemical analyses were made during the year.
3. The water obtained from the Moors is soft and has a small degree of acidity. The water is hardened by passing it over limestone chippings and this treatment prevents the plumbo-solvent action which the water might otherwise have.
4. No form of contamination occurred during the year.
5. The number of dwelling houses supplied from public mains direct to the houses was 723.
No houses were known to be supplied from public water mains by means of standpipes.
160 dwellings had their own private water supply.

